



ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE

URBAN SANITARY DISTRICT

OF

CROMER

FOR THE YEAR

1893.

CROMER URBAN DISTRICT.

AREA 851 ACRES.

POPULATION (1891), 2197.

ESTIMATED PRESENT POPULATION, 2317.

NUMBER OF INHABITED HOUSES, —



ANNUAL REPORT.



BIRTHS.

THE birth-rate in Cromer is habitually low, varying but little from year to year. Thus last year it was 24·5 per 1000 inhabitants, against 24·3 in 1892, and 22·7 per 1000 in 1891. The total number of births were 57, including 31 male and 26 female children.

If the number of deaths occurring in 1893 are deducted from the births, a balance of 30 is left in favour of the latter, representing a natural increase in the population of the place of about 11·6 per 1000. Judging, however, from the number of new houses that were built in Cromer last year, the actual increase of population was much above this figure.

DEATHS.

Once more it is my good fortune to have to report a very low death-rate, the lowest in fact recorded during the past 15 years. A mortality of only 11·5 per 1000 inhabitants for the year, and an average death-rate during the preceding five years of 13·4 per

1000, furnish incontrovertible evidence of Cromer's habitual healthiness. When I mention the fact that the annual death-rate last year in the Erpingham Rural Sanitary District was 17·2 per 1000, some idea may be formed of the very exceptional position occupied by Cromer in this respect. The total number of deaths in the year were 31, or 27, if the deaths of four visitors are excluded from the lists. As regards sex, 19 of the deceased were males and only 12 females. All the deaths were duly certified. Coroner's inquests were held in two cases of sudden death.

SEASONAL MORTALITY.

			1893		1883-92
First Quarter	...	...	14	...	19
Second Quarter	...	...	9	...	13
Third Quarter	...	...	9	...	14
Fourth Quarter	...	...	15	...	10

Only in the last quarter of the year was the mortality above the average of the past ten years. In all the other quarters the death-rate was much lower than usual. In all probability the remarkably dry, warm weather which prevailed during the greater part of 1893, was favourable to health and longevity in Cromer. Epidemic disease, which plays such an important part in raising the death-rate of large towns, has never any appreciable effect on the mortality of this district.

AVERAGE DURATION OF LIFE.

The mean age of the deceased—48·8 years—is a somewhat remarkable figure, if we take into consideration the fact that the infantile death-rate in Cromer last year, was not conspicuously low. It will be seen, however, in the subjoined table that although the infantile mortality was not less than usual, there were no deaths at all between the ages of one and 25 years.

MORTALITY AT DIFFERENT AGES.

Under 1 year	...	...	...	...	6 deaths.
1 to 5 years	...	...	...	...
5 to 15 years	...	...	...	...
15 to 25 years	...	...	...	...
25 to 40 years	...	...	...	...	5 „
40 to 60 years	...	...	...	...	3 „
60 to 70 years	...	...	...	...	5 „
70 to 80 years	...	...	...	...	4 „
80 and upwards	...	...	...	...	4 „
					<hr/>
					27
					<hr/>

INFANTILE DEATH-RATE.

The number of children dying under one year of age to 1000 births, was :—

1893.	1883-92.
122 ...	111.

It is evident from this table that the infant mortality was rather above the average. It is satisfactory, however, to record the fact that none of these infantile deaths were due to epidemic disease, as will be seen in the following table.

CAUSES OF DEATHS OF CHILDREN UNDER ONE YEAR OLD.

Convulsions	...	...	...	...	1 death.
Inanition	...	...	...	...	2 „
Marasmus	...	...	...	...	1 „
Natural Causes	...	...	...	...	1 „
Premature Birth	...	...	...	...	1 „
					<hr/>
					6
					<hr/>

ZYMOTIC SICKNESS AND MORTALITY.

Cromer did not enjoy complete immunity from infectious disease in 1893, as has so often been the case in previous years. In the month of July, two cases of scarlatina occurred, a circumstance not altogether surprising, considering the prevalence of this disease in the surrounding district and throughout the country generally at this period of the year. However, such prompt measures were taken by the medical man in charge of these cases, to prevent the spread of the malady, that in neither instance was any other person affected.

In the month of August a visitor's child was taken ill with diphtheria, two or three days after its arrival from a place in which this disease happened to be very prevalent at the time. I think there can be no doubt this was an imported case, as, quite apart from the fact that the highest authorities in sanitary medicine do not in the present day consider bad drainage a cause of diphtheria, there were no sanitary defects of any importance in the house in question. Unfortunately, the child succumbed to the malady.

ISOLATION HOSPITAL.

In the month of March, Dr. Monckton Copeman, of the Local Government Board, made an inspection of Cromer, in view of the possible advent of cholera, and subsequently issued a very valuable report on the measures to be adopted, in order to limit the disastrous results of any such invasion hereafter. Among other matters he laid great stress on the necessity for an Isolation Hospital, contending, very justly, that although Cromer had been enjoying, for some years past, an almost complete immunity from infectious disease, such good luck could not be reasonably expected to last for ever, general experience showing that sooner or later epidemic disease would creep in, and perhaps commit great havoc, if no preparations had been made beforehand to check the outbreak in its initial stage. In the absence of an Isolation Hospital, it might be

very difficult, if not quite impossible, to control an epidemic that had somehow or other got a firm footing in the place. Panic would not improbably drive all the visitors away in a few days, whilst the sanitary reputation of Cromer might be seriously impaired, possibly for years. Of course, a big palatial structure would be wholly uncalled for in a small town. A largish cottage, somewhere on the outskirts of the place, would fulfil all the requirements of the case for some years to come.

SUFFIELD PARK DRAINAGE SCHEME.

Familiar as I am with the insanitary arrangements prevalent at Suffield Park, which cannot well be obviated until some drainage scheme has been carried out for this part of Overstrand, I cannot help thinking it would be very advantageous to the sanitary interests of Cromer, if the Local Board hearkened to the prayer of the Suffield Park Committee, who see no way of overcoming their present difficulties except by effecting a junction with the Cromer sewerage system. Unless something is done in this district, and that pretty soon, some serious outbreak of infectious disease will be very apt to occur, when the near proximity of Cromer to Suffield Park might be very prejudicial to the interests of the former place.

SANITARY SUPERVISION.

During the past year I have paid frequent visits to the town, being seldom absent more than a week at a time. Spending pretty well half my days either at West Beckham or Norwich, where I practise my profession, I never find the least difficulty in fulfilling any duties that may be required of me in connection with the office. As a matter of fact, under the present *régime*, there is comparatively little work for the Medical Officer of Health to do in Cromer. The town still is but a small one, and having been almost all of it rebuilt within the last few

years, there are none of those old insanitary rookeries in it, which in larger and older towns engross no small share of the health official's time and attention. Then again, epidemic disease, the bug-bear of sanitary medicine, hardly ever sets foot in Cromer, and whenever it does so, invariably takes its departure in the course of a few days. Mr. Scott, the Surveyor and Sanitary Inspector, carries out the various duties of his two offices so thoroughly and effectually, that the ground is very much cut away from under the feet of the Medical Officer of Health. For my own sake I sometimes wish I had more work to do in Cromer, though for the sake of the place itself, I am very well pleased that great energy and activity, useful and indispensable qualities as they are in some situations, are hardly requisite in this urban district.

The slaughter-houses, bake offices, and dairies, have all been duly inspected. The former are certainly less objectionable than in former years, though I cannot speak very favourably of them. They are too limited in space, and are rather out of place in the midst of a crowded, popular resort like Cromer. It would be a great advantage, if they could be removed further afield.

The public scavengering has been efficiently carried out, and I have seldom had any complaint to make on this score, although I frequently inspect the various yards, &c.

The water supply maintains its high reputation for purity, whilst there is every reason to believe the quantity is amply sufficient for all the wants of Cromer.

Mr. A. F. Scott, the Surveyor and Sanitary Inspector, informs me the following nuisances were dealt with during the past year :—

Stable nuisance ...	...	...	...	...	1
Manure heaps, &c. ...	...	...	...	...	4
Slaughter houses ...	...	...	..	...	3
Defective privy ...	...	...	...	...	1
Nuisances from fish-boxes ...	...	...	...	...	4
Nuisances from pigs ...	...	...	...	...	7
Testing house drains, (old property) ...	...	...	...	...	3

In addition to the above work, all new house drains were examined, whilst in a number of cases great improvements were effected in the sanitary arrangements of old property, which, having been accomplished without the aid of any formal notice, were not recorded in the list of nuisances.


No fresh sewers were laid down during the year, but plans were prepared for an extension of the sewer along the Runton Road and the adjoining streets, as well as for an auxiliary sewer in Garden Street for surface water.

Notices were also served to have certain streets made up in compliance with the Public Health Act prior to being taken over by the Board.

SHEPHARD T. TAYLOR.

West Beckham,

March, 1894.



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